UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND					
1 Date of Request: /// 30/09 2 Serial/Patent # /0-796423					
3 Please refund the following fee(s):		4 PAPE NUME		5 DATE FILED	6 AMOUNT
	Filing				\$
	Amendment				\$
	Extension of Time	·			\$
	Notice of Appeal/Appeal				\$
8	Petition	1FW		16/04	\$ 130
	Issue				\$
	Cert of Correction/Terminal Disc.				\$
	Maintenance				\$
	Assignment				\$
	Other				\$
		7 TOTAL AMOUNT OF REFUND			\$ 130
		8 TO BE REFUNDED BY:			
10 REASON:		Treasury Check			
	Overpayment	6	C	redit Dep	osit A/C #:
	Duplicate Payment	9 20 1 4 3 0			
X	No Fee Due (Explanation):				
PTO ENLOR					
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME: ABROWN			T	ITLE:	Hy
SIGNATURE: PHONE: 2-3105					1-3105
office:					
THIS SPACE RESERVED FOR FINANCE USE ONLY: APPROVED: DATE: 220					
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Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B